BEST AVAILABLE CODY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

2271/66669

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			6				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			6 minus 20=		* Ø			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			5 minus 3 =		* 2			X42=	···	OR	X84=	168
MU	LTIPLE DEPEN	RESENT	ESENT				+140=		OR	+280=		
* If the difference in column 1 is less tha				ero, ente	r "0" in c	column 2	_	TOTAL	-	OR	TOTAL	908
CLAIMS AS AMENDED - PAR						5		SMALL E	ENTITY	ОВ	OTHER SMALL I	THAN
_	(Column 1)		(Colur					SWALL		OR I I	SWALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* .	Minus	***		=		X42=		OR	X84=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+140=		OR	+280=	
							L	TOTAL		00	TOTAL	
								DDIT. FEE		OR	ADDIT. FEE	
_		(Column 1)			mn 2) HEST	(Column 3)	_					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUN PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		ا ا	+140=		OR	+280=	
								TOTAL		OR	TOTAL	
		(Column 1)		(Coli	ımn 2)	(Column 3)	ΑL	ODIT. FEE	****		ADDIT. FEE	
AMENDMENT C		CLAIMS		HIG	HEST	(Column of	I		ADDI-	1		ADDI-
		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=-		X42=		OR	X84=	
	FIRST PRESE	ULTIPLE DEPENDEN		IT CLAIN	CLAIM		+140=	-		+280=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+28U= TOTAL	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											